

South Carolina Department of Disabilities & Special Needs

FY21 Day Services Licensing Prep List

Effective July 1, 2020, specific day services indicators have been moved out of the realm of contract compliance and to the realm of licensing. This means that certain documents will need to be available to the licensing reviewer at the time of the visit to the facility, available in Therap, or uploaded to the Alliant portal within the required timeframes. Alliant staff will have access to Therap, so providers will not need to transfer any information stored there. If your agency has an “index” to assist reviewers with the location of specific information in Therap, that index should be provided.

As a general guide, day service providers will need to ensure the following documentation is available to the Alliant Review staff at the time of the Licensing Review:

- ☐ Census for the date of review
- ☐ Staff list for each day services location, noting staff who are responsible for transportation
- ☐ Annual Fire Marshal Inspection (include evidence of correction if violations were noted)
- ☐ Electrical Inspection (within prior 3-year period)
- ☐ Sprinkler System Inspection
- ☐ HVAC Inspection (within prior 3-year period)
- ☐ Evidence of quarterly fire/disaster drills.
- ☐ Evidence of staff fire/safety training, including the use of fire extinguishers.
- ☐ Evidence of daily checklists completed for each vehicle in active use.
- ☐ Evidence of vehicle maintenance.
- ☐ Evidence of the successful completion of a Defensive Driving course for all staff transporting participants.
- ☐ Documentations of provisions for alternate coverage for staff members who are ill. Such policies shall require staff members with acute communicable disease, including respiratory infection, gastro-intestinal infection, and skin rash, to absent themselves during the acute phase of illness
- ☐ Evidence of the written authorization to administer medication for any participants with medications at the day services location.
- ☐ Medications Control sheets (current and past 3 calendar months – for all controlled medications)
- ☐ Policy regarding the disposition of medications
- ☐ Medication Administration Record (MARs – current and previous 3 calendar months)
- ☐ Medication error rates for previous 3 calendar months (using calculation method described in Directive 100-29-DD)
- ☐ Evidence of Therap documentation of any restraints that occurred in the past 12 months (if no restraints occurred, please provide a signed statement that none occurred)
- ☐ Documentation to indicate the Intensive Behavior Intervention provider and Human Rights Committee were informed of the use of any restraints

**Any documentation submitted in the form of a spreadsheet is subject to verification.*

A sample of records may be selected to validate data entered into staff training or vehicle maintenance spreadsheets.

Additional information may be requested at the time of review.

Please refer to the DDSN Licensing Review Tools for specific indicators and references to source documents.

www.ddsn.sc.gov > Contacts > Quality Management > Licensing